Name Eric Alan Crawford

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## SCHEDULE I—EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling \$200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding \$1,000. See examples below.

Exclude: Military pay (such as National Guard or Reserve pay), federal retirement programs, and benefits received under the Social Security Act.

Source	Туре	Amount
Keene State	Approved Teaching Fee	\$6,000
State of Maryland	Legislative Pension	\$9,000
Examples:   Civil War Roundtable (Oct. 2nd)	Spouse Speech	\$1,000
Ontario County Board of Education	Spouse Salary	NA
Halsey Outlook Advertising	Monthly Raymonts	*75as.71
	cecitytel from 9/50/11-	
	soile or membership	
	interest in Farmhouse	
	Media uc	
Funilies Inc of Ackansas	Sprust Sadesy	Z

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# SCHEDULE II—PAYMENTS MADE TO CHARITY IN LIEU OF HONORARIA

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Ethics. A green envelope for transmitting the list is included in each Member's filing package.

Source    Association of American Associations, Washington, DC   XYZ Magazine   X	Activity Speech Article	<b>Date</b> Feb. 2, 2011  Aug. 13, 2011	\$2,000 \$500

Agri-Advertising Jones bow, AR	JT Simon & Schuster  1st Bank of Paducah, KY Accounts	SP	ment accounts which are not self-alrected, provide only the name of the institution holding the account and its value at the end of the reporting period.  For rental or other real property held for investment, provide a complete address.  For an ownership interest in a privately-held business that is not publicly traded, state the name of the business, the nature of its activities, and its geographic location in Block A.  Exclude: Your personal residence, including second homes and vacation homes (unless there was rental income during the reporting period); any deposits totaling \$5,000 or less in a personal checking or saving accounts; and any financial interest in, or income derived from, a federal retirement program, including the Thrift Savings Plan.  If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC), or is jointly held with your spouse (JT), in the optional column on the far left.  For a detailed discussion of Schedule III requirements, please refer to the instruction booklet.	BLOCK A  Asset and/or income Source  Identity (a) each asset held for investment or production of income with a fair market value exceeding \$1,000 at the end of the reporting period, and (b) any other reportable asset or sources of income which generated more than \$200 in "unearned" income during the year.  Provide complete names of stocks and mutual funds (do not use ticker symbols.)  For all IRAs and other retirement plans (such as 401(k) plans) that are self-directed (i.e., plans in which you have the power, even if not exercised, to select the specific investments), provide the value for each asset held in the account that exceeds the reporting thresholds. For refire-
* * * * * * * * * * * * * * * * * * *	s Indefinite	×	None	Indicate value of Asset  Indicate value of asset at close of reporting year. If you use a valuation method other than fair market value, please specify the method used.  do  If an asset was sold during the reporting year and is included only because it generated income, the value should be "None."
4-CInion	X	X X	\$25,000,001 - \$50,000,000	Type of Income  Check all columns that apply. For retirement accounts that do not allow you to choose specific investments or that generate tax-deferred income (such as 401(k) plans or IRAs), you may check the "Tax-Deferred" column. Dividends, interest, and capital gains, even if reinvested, must be disclosed as income. Check "None" if the asset generated no income during the reporting period.
X X	×	X	None       -         \$1 - \$200       =         \$201 - \$1,000       ≡         \$1,001 - \$2,500       <	Amount of Income For assets for which you checked "Tax-Deferred" in Block C, you may check the "None" column. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, interest, and capital gains, even if reinvested, must be disclosed as income. Check "None" if no income was earned or generated.
S		S (partial)	If only a portion of an asset is sold, please indicate as follows: (S) (partial) See below for example.  P, S, E	BLOCK E Transaction Indicate if the asset had purchases (P), sales (S), or exchanges (E) exceeding \$1,000 in reporting year.

## SCHEDULE IV— TRANSACTIONS

Name Eric Alan Crawford

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						Dot. 20, 2011.	to: 10 ytors beginning on	Monthly payments of 73506.57	Outpour Advertising resultation	* Termot sale to Halsay	Farmhouse Media UC*	SP	cate ( <i>i.e.</i> , "partial sale"). See example below.  Capital Gains — if a sales transaction resulted in a capital gain in excess of \$200, check the "capital gains" box and disclose this income on Schedule III.	resulted in a capital loss. Provide a brief description of any exchange transaction. Exclude transactions between you, your spouse or dependent children, or the purchase or sale of your personal residence, unless it generates rental income. If only a portion of an asset is sold, please so indicates	Report any purchase, sale, or exchange transactions by you, your spouse, or dependent child during the reporting period of any security or real property held for investment that exceeded \$1,000. Include transactions that
	,												PURCHA	SE	of T
									-		×	×	SALE	•	Type of Transaction
			·										EXCHANG	3E	ction
											<		Check Box Gain Excee	if Capital eded \$200	)
											11-06-01	10-12-11	Monthly, or Bi-weekly, if applicable	(MO/DAY/YR)	Date
													\$1,001- \$15,000	>	
												×	\$15,001- \$50,000	Œ	
							ļ						\$50,001- \$100,000	ဂ	Am
													\$100,001- \$250,000	0	unt
							ļ	<u> </u>			X		\$250,001- \$500,000	П	Amount of Transaction
						_							\$500,001- \$1,000,000	TI	ransa
							<u> </u>		<u> </u>				\$1,000,001- \$5,000,000	<u> </u>	actio
					<u> </u>								\$5,000,001- \$25,000,000		<b>š</b>
<u> </u>		 		. ,.						ļ			\$25,000,001 \$50,000,000 Over		
													\$50,000,000	) -	

### SCHEDULE V— LIABILITIES

Name Eric Alan Crawford

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Report liabilities of over \$10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. Exclude: Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; liabilities of a business in which you own an interest (unless you are personally liable); and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report *revolving* charge accounts (i.e., credit cards) only if the balance at the close of the preceding calendar year exceeded \$10,000. **NOTE:** Pending legislation may require Members to report mortgages on personal residences.

						SP, DC, JT
	JB2 Funding Corp, Arcadia, CA Nov 2009 Commercial Persona	Heritage Bank, Symusburg, AR Nov 2009 Communicial R/E	Heritage Bank, Jonesburg, AR Nov 2009 Commercial LOC	tarmhous Media, LLC.	Example: First Bank of Wilmington, DE	Creditor
	Nov 2009	Nov 2009	Nov 2009		May 1998	Date Liability Incurred Mo/Year
Property	Commacial Personal	Communicial RIE	Commercial LOC		Mortgage on 123 Main St., Dover, DE	Type of Liability
						\$10,001- \$15,000
	×		<b>×</b>			\$15,001- \$50,000
_	_	_				\$50,001- \$100,000
		X			×	\$250,000 D \$250,001
$\perp$			<u> </u>			\$500,000 m at of the state of t
						\$1,000,000 T ab
$\vdash$		<u> </u>				\$5,000,000 \$5,000,001
$\vdash$						\$25,000,000 - \$25,000,001- \$50,000,000 -
						Over \$50,000,000

#### SCHEDULE VI— GIFTS

**Exclude:** Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of \$140 or less need not be added towards the \$350 disclosure threshold. Report the source, a brief description, and the value of all gifts totalling more than \$350 received by you, your spouse, or a dependent child from any source during the year.

**Note:** The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule

	Source Source  Framole: Mr. Joseph H. Smith, Anvitown, Anvistate	Description  Silver Platter (determination on personal friendship received from Committee on Ethics)
	N/R	
_		

#### SCHEDULE V— LIABILITIES

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Report liabilities of over \$10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. Exclude: Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; liabilities of a business in which you own an interest (unless you are personally liable); and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report revolving charge accounts (i.e., credit cards) only if the balance at the close of the preceding calendar year exceeded \$10,000. NOTE: Pending legislation may require Members to report mortgages on personal residences.

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	7			SP, DC, JT	
	MHIL	Liber+	Example:		
	WHIS Fargo	Liberty Bank of Arkanson	First Bank of Wilmington, DE	Creditor	
	1-2005	9-2011	May 1998	Liability Incurred Mo/Year	Date
Interest rate: 5.375%	1-2005 mort 2-96 2-34 CR 458 2004	9-2011 PEUT Consolidation 5.6%	Mortgage on 123 Main St., Dover, DE	Type of Liability	
				\$10,001- \$15,000	
				\$15,001- \$50,000	
<u> </u>				\$50,001- \$100,000	
	X	×	×	\$100,001- \$250,000	A M
				\$250,001- \$500,000	=    =    =    =    =    =    =
				\$500,001- \$1,000,000	Amount of Liability
				\$1,000,001- \$5,000,000	<del>₹</del>
				\$5,000,001- ± \$25,000,000	1
				\$25,000,001- \$50,000,000	
		ĺ		\$50,000,000	·l

#### SCHEDULE VI— GIFTS

relationship to you. Gifts with a value of \$140 or less need not be added towards the \$350 disclosure threshold. Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her Report the source, a brief description, and the value of all gifts totalling more than \$350 received by you, your spouse, or a dependent child from any source during the year.

**Note:** The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Ethics)	\$375
N/A		
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## SCHEDULE VII— TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than \$350 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were paid directly by the sponsor

or were paid by you and reimbursed by the sponsor. **Exclude:** Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a

spouse or dependent child that is totally independent of his or her relationship to you.

		_			 	 	 	 	 	,	
	Examples:	-700.19700	N/A	-							
Source	Chicago Chamber of Commerce	Roycroft Corporation									
Date(s)	Mar. 2	Aug. 6–11									
1	DC—Chicago—DC	DC—Los Angeles—Cleveland									
Lodging? (Y/N)	z	Υ									
Food? (Y/N)	z	Υ									
Was a Family Member Included? (Y/N)	Z	Υ				A COL				The same of the sa	
Number of days not at sponsor's expense	None	2 Days	-								

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֡֝֜֝֝֓֜֜֝֟֝֓֓֓֓֓֓֓֓֓֓֜֟֝֓֓֓֓֡֓֡֓֜֡֡֓֜֟֝֓֡֡֡֡֡֡֡֡֡֡	
֡֝֜֝֝֓֜֜֝֟֝֓֓֓֓֓֓֓֓֓֓֜֟֝֓֓֓֓֡֓֡֓֜֡֡֓֜֟֝֓֡֡֡֡֡֡֡֡֡֡	

Name Eric Alan Crowbord

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organization, or any educational or other institution other than the United States. proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner,

Exclude: Positions listed on Schedule I; positions held in any religious, social, fraternal, or political entities (such as political parties and campaign organizations); and positions solely of an honorary nature.

Position  N/A	1			
	N A			
Name of Organization	Name of Organization			

## SCHEDULE IX—AGREEMENTS

employee welfare or benefit plan maintained by a former employer. government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of

Date	Parties To	Terms of Agreement
1106/06-01	10-20,2011 Fasm house Mitalia LCC	Term of sale to Halsey Outlook ALVERTISING
;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;		[ESUITED in monthly payments of 9250\$.57]
		, ,